

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JES		4-8-99
O.I.P.E. CLASSIFIER	JW		4-12-99
FORMALITY REVIEW	69652		4-10-99 06/29/99

## INDEX OF CLAIMS

↗ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ↓ ..... Restricted O ..... Objected

Claim	Date
1	3/9/99
2	5/15/99
3	5/15/99
4	5/15/99
5	5/15/99
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9	5/15/99
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20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	NN
30	NN
31	NN
32	X
33	N
34	XN
35	TN
36	YN
37	TN
38	YN
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here